County of Moore Planning and Inspections



Inspections/Permitting: (910) 947-2221

Planning: (910) 947-5010 Fax: (910) 947-1303

EXTERNAL CHECKLIST FOR IN HOME CHILD CARE AND FAMILY CARE HOME PERMIT APPLICATION

- Completed permit application. Applications can be obtained from our department, Planning and Inspections located at 1048 Carriage Oaks Drive, Carthage, NC 28327, or online at www.moorecountync.gov, Department Planning & Inspections, Applications. If you would like to speak with someone regarding the application our phone number 910-947-5010 or 910-947-2221.
- ☐ For a new septic system, an improvement permit issued by the Moore County Environmental Health Department for the proposed use. The Environmental Health Department is located at 1042 Carriage Oaks Drive, Carthage, NC 28327. Their phone number is 910-947-6283.
- ☐ Existing septic systems: A septic system recertification permit is required by the County of Moore Heath Department, Environmental Health Division for the following:
 - Additions extending outside the existing foundation.
 - Interior renovations that result in an increased number of occupants.
 - Change of use that would effect the amount and/or type of waste water generated.
 - Replacement or addition of storage buildings, swimming pools, decks, concrete pads, irrigation systems, geothermal systems, driveways, etc.. when in the area of septic system and/or repair area.

The Environmental Health Department is located at 1042 Carriage Oaks Drive, Carthage, NC 28327. Their phone number is 910-947-6283.

- ☐ If the proposed child or adult care use is to be operated within the unincorporated Moore County you will need to speak with a planner to confirm the proposed use is permitted/allowed.
- ☐ An inspection checklist from the NC Division of Health Service Regulation must be provided to the inspector at the time of the inspection. This checklist can be obtained by contacting NC DHSR at www.ncdhhs.gov/dhsr or the telephone number is 919-855-4620.
- ☐ A copy of recorded deed may be required to verify ownership. A survey may also be required if lot configuration does not reflect the current records of the county.
- A zoning permit may be required if the subject property is located within one of the following municipalities or their ETJ.

Cameron: 910-245-3212 Taylor Town: 910-295-4010

Carthage: 910-947-2331 Vass: 910-245-4676

Foxfire: 910-295-5107 Whispering Pines: 910-949-3141

Robbins: 910-948-2431

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In Home Child Care or Family Care Home Permit Application					
Application Date: Email Address:	on Date: Email Address:				
Location/Address of Property:					
Description of Proposed Work:					
Applicant:			Phone:		
Owner:			Phone:		
Owner Address:	City		St:	Zip:	
Type of Permit:					
		Total Estimated Co	st \$		
Please list the names of the contractors who will be performing the work for this project. If the work will be performed by the owner just write owner or self in the name field. Please put N/A in any fields that are not applicable to the project.					
General Contractor:	Phone:		License:		
Address:	City		St	Zip	
Electrical Contractor:	Phone:		License:		
Address:	City		St	Zip	
I hereby certify that all information in this application is correct and applicable State and local laws, ordinances and regulations. The In approval plans and specifications for the project permitted herein. be performed on the project.	spection Dep	artment will be noti	ied of any c	hanges in the	
Owner/Agent Signature:	Date:				